

Mortgage Loan Originator Registration

A registration fee of \$100.00 per mortgage loan originator must accompany this form

The mortgage company must complete both sides of this form if it employs one or more mortgage loan originators. The form is not to be completed by the mortgage loan originator. Please read instructions page before completing this form.

Name of Company _____

Corporate HQ Address _____

Street

City

State

Zip

Company License # or Registration # _____ **Telephone:** _____

I hereby certify that all information on this registration form is true and correct.

**Signature and Title of Managing Principal
of Mortgage Company**

STATE OF: _____

COUNTY OF: _____

Subscribed and sworn to before me on this ____ day of _____, _____.

Notary Public _____

(Notary Seal)

My Commission Expires _____

Please make check payable to TN Department of Financial Institutions.

Please return completed form(s) and fee to: TN Department of Financial Institutions

Compliance Division

Attn: Registrations

511 Union Street, 4th Floor

Nashville, TN 37219



Please provide the information requested below for each individual applying for registration as a mortgage loan originator. If necessary, make additional copies of this page. When registering large numbers of individuals, you are encouraged to send a disk containing an Excel spreadsheet listing all required information, separated by "columns", in the exact order as the form requests.

1. _____
(First Name) (MI) (Last Name)
Hire Date _____
Home Address _____
(Street, City, State, Zip)
Branch Address _____
(Street, City, State, Zip)
Date of Birth: _____ SSN: _____

2. _____
(First Name) (MI) (Last Name)
Hire Date _____
Home Address _____
(Street, City, State, Zip)
Branch Address _____
(Street, City, State, Zip)
Date of Birth: _____ SSN: _____

3. _____
(First Name) (MI) (Last Name)
Hire Date _____
Home Address _____
(Street, City, State, Zip)
Branch Address _____
(Street, City, State, Zip)
Date of Birth: _____ SSN: _____

4. _____
(First Name) (MI) (Last Name)
Hire Date _____
Home Address _____
(Street, City, State, Zip)
Branch Address _____
(Street, City, State, Zip)
Date of Birth: _____ SSN: _____

5. _____
(First Name) (MI) (Last Name)
Hire Date _____
Home Address _____
(Street, City, State, Zip)
Branch Address _____
(Street, City, State, Zip)
Date of Birth: _____ SSN: _____

6. _____
(First Name) (MI) (Last Name)
Hire Date _____
Home Address _____
(Street, City, State, Zip)
Branch Address _____
(Street, City, State, Zip)
Date of Birth: _____ SSN: _____

